## Request for Cancellation of Certificate

244704

File the original with:	mail or tax a copy to:
Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 6 /19/20/3	Docket # 2009-511-T
Please consider this a request to cancel my:	
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	RECEIVED
Class C Charter Bus Certificate	JUN 192013
Non-Emergency Certificate	TRANS DEPT
Class E Household Goods Certificate	
Class E Hazardous Wastes Certificate  My Certificate Number is 8229-A	••••••
(Name of Company)	(If applicable)
70 (Carvais St Suite 150-203 (Street Address)	(Mailing Address if different from Street Address)
(City, State, Zip Code)	(City, State, Zip Code)
763 -921e - 7933 (Telephone Number)	(Signature)
· 	(Title) Owner, President, etc.

ORS Revised 2-18-10